

<b>Interview Summary</b>	<b>Application No.</b>	<b>Applicant(s)</b>	
	09/987,377	AKAHORI, SADATO	
	Examiner Ashutosh Upreti	Art Unit 2623	

All participants (applicant, applicant's representative, PTO personnel):

(1) Ashutosh Upreti. (3) \_\_\_\_\_.

(2) Alan Kasper (Reg. No. 25,426). (4) \_\_\_\_\_.

Date of Interview: 02 December 2005.

Type: a) Telephonic b) Video Conference  
c) Personal [copy given to: 1) applicant 2) applicant's representative]

Exhibit shown or demonstration conducted: d) Yes e) No.  
If Yes, brief description: \_\_\_\_\_.

Claim(s) discussed: 1-16.

Identification of prior art discussed: \_\_\_\_\_.

Agreement with respect to the claims f) was reached. g) was not reached. h) N/A.

Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: Examiner informed applicant's attorney that adding the word "automatically" on line 7 of claim 1 between "(c)" and "obtaining", and making a similar amendment to all independent claims, would put the application in condition for allowance. The attorney for the applicant needed to consult further with the applicant and therefore was unable to authorize such an amendment over the phone, prior to the mailing of this office action.

(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)

THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER OF ONE MONTH OR THIRTY DAYS FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

Examiner Note: You must sign this form unless it is an  
Attachment to a signed Office action.

\_\_\_\_\_  
Examiner's signature, if required